

PROGRAM TRACKING AND REPORTING SUBSYSTEM DATA SHEET
(One PTRS Record Required for Each Unit of Work as defined in the PPM)

SECTION I - Transmittal

Inspector Name Code:

Record ID:	Activity Number:	FAR:
NPG:	Status (POC):	Call up Date:
Start Date:	Results (ACEFISTX):	Closed Date:
Designator:	Affiliated Designator:	OTNA:
Aircraft Reg. #:	Loc./Departure Point:	Loc./Arrival Point. #:
Flight #:	Complaint #:	Occurrence #:
Make-Model-Series:	Incident #:	
Simulator/Device ID:	EIR #:	
Non-Cert. Activity Name/Company:	Accident #:	
Airman Cert. #:	Name:	
Examiner Cert. #:	Name:	
Applicant Cert. #:	Name:	
Rec. Instructor Cert. #:	Name:	

Pass/Fail:	Exam Kind:	8430-13 #:
Tracking:	Miscellaneous:	Numeric Misc.:
Local Use:	Regional Use:	National Use:
Activity Time:	Travel Time:	Travel Cost:

Triggers:	Activity Number:	Repeat Number:	Geographic? Yes <input type="checkbox"/> No <input type="checkbox"/>	Foreign? Yes <input type="checkbox"/> No <input type="checkbox"/>
-----------	------------------	----------------	--	---

SECTION II - Personnel (Unlimited)

Personnel Name	Position	Base	Remarks (23 Characters)

SECTION III Equipment (Unlimited)

Manufacturer	Model	Serial #	Remarks (23 Characters)

SECTION IV - Comment (Unlimited)

Primary Area	Key Word	Opinion Code	Common Text (Unlimited Length)

Date:

Originator:

Office:

Inspector Signature:

Supervisor Initials:

